#### Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: HYPERFORIN HALOGENATED

DERIVATIVES, THE USE THEREOF

AND FORMULATIONS CONTAINING

THEM

Attorney Docket Number:: 2503-1120

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: EZIO

Middle Name::

Family Name:: BOMBARDELLI

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIA VAL DI SOLE, 22

Address::

City of Mailing Address:: MILANO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20141

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: PAOLO

Middle Name::

Family Name:: MORAZZONI

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE ORTLES, 12

Address::

City of Mailing Address:: MILANO

# DT01 Rec 0 PCT FT 128 0CT 2004

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20139

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: ANTONELLA

Middle Name::

Family Name:: RIVA

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE ORTLES, 12

Address::

City of Mailing Address:: MILANO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-20139

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: NICOLA

Middle Name::

Family Name:: FUZZATI

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE ORTLES, 12

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City of Mailing Address::

MILANO

State or Province of Mailing Address::

Country of Mailing Address::

ITAL?

Postal or Zip Code of Mailing Address:: I-20139

## Correspondence Information

Correspondence Customer

00466

Number::

#### Representative Information

Representative Customer	00466
Number::	

## Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/EP03/03923	4/15/03

#### Foreign Priority Information

Country::	Application	Filing Date::	Priority	
	Number::		Claimed::	
ITALY	MI2002A000871	4/23/02	Yes	

#### Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

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